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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attomey D	ocket No.	00138CIPCON(3600-360-01)					
First Inven	tor	J. Kimmel et al.					
Title	MODIFIED OX OXIDES	XYGEN REDUCED VALVE METAL					

(Only for new nonprovision	under 37 CFR 1.	Express Mail Label No. EV306611701US									
APPLICA See MPEP chapter 600 cond		ADE	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
2. Applicant claims sr See 37 CFR 1.27. 3. X Specification (preferred arrangement s) - Descriptive title of - Cross Reference c - Statement Regard - Reference to sequence a computer property of the Brief Summary of - Brief Summary of - Brief Description c - Detailed Description c - Claim(s) - Abstract of the Dis 4. Drawing(s) (35 U.S.)	Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. X Specification [Total Pages 29] - Descriptive title of the invention Cross Reference to Related Applications Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description						7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney 11. English Translation Document (if applicable)				
a. Newly exect to the formal of the formal o	t: <u>1746</u> prior apponal application	13. X Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: 18. Other: 19. In prior application No.: 10/012,187									
omy be relied upon when a port	ion nas been mai	19. CORRE			··· ·	parts.					
Customer Number or Bar Code Label (Insert Customer No. or Attach					ahel here)	or X	Correspond	dence address below			
Name	Martha Ann Finnegan, Esq.										
Cabot Corporation											
Address 157 Concord Road											
City Billerica				State	State MA Zip Code 01821-70		01821-7001				
Country	USA		Tele	ephone	1-978-67	70-6198	Fax	1-978-670-8027			
Name (Print/type) Signature	Luke A. Kilyl	a Della		R	egistration l	No. (Attome		33,251 September 2, 2003			

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Kim Blum Name (Print)

Signature



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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)2,088.00

Complete if Known						
Application Number	Unassigned					
Filing Date	September 2, 2003					
First Named Inventor	J. Kimmel et al.					
Examiner Name	Unassigned					
Art Unit	Unassigned					
Attorney Docket No.	00138CIPCON(3600-360-01)					

METHOD	OF PA	YME	NT (check all that apply)	FEE CALCULATION (continued)						
Check	Credit	card	Money Other None	3. ADDITIONAL FEES						
La					Entity		Entity			
X Deposit A	Account			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Deposit Account Number	03-0060)		1051	130	2051	65	Surcharge – late filing fee or oath		
Deposit Ca Account Name	abot Cor	poratio	on	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet		
The Commiss	sioner is	autho	prized to: (check all that apply)	1053	130	1053	130	Non-English specification		
X Charge fee				1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
X Charge ar	ny additiona	al fee(s)	during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
Charge fe	e(s) indicat	ed belov	w, except for the filing fee	1805	1.840*	1805	1.840*	Requesting publication of SIR after		
to the above-iden	ntified depo	sit acco	unt.	1000	1,040	1003	1,040	Examiner action		
	FE	E CA	LCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC F	ILING F	EE		1252	410	2252	205	Extension for reply within second month		
Large Entity	Small		_	1253	930	2253	465	Extension for reply within third month		
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Description Fee Paid	1254	1,450	2254	725	Extension for reply within fourth month		
1001 750	2001	375	Utility filing fee 750.00	1255	1,970	2255	985	Extension for reply within fifth month		
1002 330	2002	165	Design filing fee	1401	320	2401	160	Notice of Appeal		
1003 520	2003	260	Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal		
1004 750	2004	375	Reissue filing fee	1403	280	2403	140	Request for oral hearing		
1005 160	2005	80	Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
				1452	110	2452	55	Petition to revive - unavoidable		
	,		STOTAL (1) (\$)750.00	1453	1,300	2453	650	Petition to revive – unintentional		
2. EXTRA C	CLAIM	EES	FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility issue fee (or reissue)		
_		Ext	Fee from below Fee Paid	1502	470	2502	235	Design issue fee		
Total Claims	85 -20)**= <u> </u>	65 x 18 = 1170.00	1503	630	2503	315	Plant issue fee		
Independent Claims	5 -3	**=	2 X 84 = 168.00	1460	130	1460	130	Petitions to the Commissioner		
Multiple Depen	dent	_	=	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity	Small			1806	180	1806	180	Submission of Information Disclosure Stmt		
Fee Fee Code (\$)	Fee Code	Fee (\$)	Fee Description	8021	40	8021	40	Recording each patent assignment per		
1202 18	2202	9	Claims in excess of 20	1809	750	2809	375	property (times number of properties) Filing a submission after final rejection (37 CFR § 1.129(a))		
1201 84	2201	42	Independent claims in excess of 3	1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))		
1203 280	2203	140	Multiple dependent claim, if not paid	1801	750	2801	375	Request for Continued Examination (RCE)		
1204 84	2204	42	**Reissue independent claims over original patent	1802	900	1802	900	Request for expedited examination		
1205 18	2205	9	**Reissue claims in excess of 20 and over original patent					of a design application		
SUBTOTAL (2) (\$) 1,338.00			Other	fee (spec	ify) _					
** or number previously paid, if greater; For Reissues, see above			*Reduc	ed by Basi	ic Filing I	ee Paid	SUBTOTAL (3) (\$)0.00			
		_						17/		

SUBMITTED BY			40		Complete (if applicable)		
Name (Print/Type)	Luke A. Kilyk	101	Registration No. (Attorney/Agent)	33,251	Telephone	1-540-428-1701	
Signature	Jak 4	C/ Khh	/		Date	September 2, 2003	

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Kim Blum

Name (Print)

Signature